

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
**097913985**

FILING DATE  
**12 DEC 2001**

APPLICANT(S)

*Oshinawa*

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51		/				
2							52		/				
3							53		/				
4							54		/				
5							55		/				
6							56		/				
7							57		/				
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34				/			84						
35				/			85						
36				/			86						
37				/			87						
38				/			88						
39				/			89						
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41				/			91						
42				/			92						
43				/			93						
44				/			94						
45				/			95						
46				/			96						
47				/			97						
48				/			98						
49				/			99						
50				/			100						
TOTAL IND.			2				TOTAL IND.						
TOTAL DEP.			18				TOTAL DEP.						
TOTAL CLAIMS			20				TOTAL CLAIMS						